

NEW LEAD INFORMATION FORM

NAME _____ PHONE _____

ADDRESS 293 N EVERGREEN KANKAKEE IL EMAIL _____

	ACTUAL		PROFORMA
NUM OF UNITS	<u>1</u>	NUMBER OF UNITS	_____
GROSSE INCOME	<u>14,400</u> ^{\$1200} PER MONTH	GROSSE INCOME	_____
TAXES	<u>\$1522</u>	TAXES	_____
INSURANCE	<u>\$792</u>	INSURANCE	_____
WATER/SWE/TRS	<u>TENANT</u>	WATER/SWE/TRS	_____
GAS	<u>TENANT</u>	GAS	_____
ELECTRIC	<u>TENANT</u>	ELECTRIC	_____
LAWN/SNOW	<u>TENANT</u>	LAWN/SNOW	_____
MANAGE 15% VACANCY LOSS	<u>\$2160</u>	MANAGE 15% VACANCY LOSS	_____
TOTAL EXP	<u>\$4474</u>	TOTAL EXP	_____
NOI	<u>\$9926</u>	NOI	_____

NOTES